

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000017853

**FILED**  
**Feb 22, 2012**  
**Secretary of State**

**Entity Name:** BARKER SPECIALTIES OF FLORIDA, INC.

**Current Principal Place of Business:**

215 CELEBRATION PLACE-SUITE 115  
CELEBRATION, FL 34747

**New Principal Place of Business:**

**Current Mailing Address:**

27 REALTY DR  
CHESHIRE, CT 06410

**New Mailing Address:**

**FEI Number:** 65-1078619

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FIELDS, DAVID  
215 CELEBRATION PLACE-SUITE 115  
CELEBRATION, FL 34747 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BARKER, GERALD  
Address: 68 TROUT BROOK ROAD  
City-St-Zip: CHESHIRE, CT 06410

Title: D  
Name: BARKER, STEVEN  
Address: 42 VERDERAME COURT  
City-St-Zip: SOUTHLINGTON, CT 06489

Title: D  
Name: BARKER, HERBERT  
Address: 3535 SOUTH OCEAN DR - #2201  
City-St-Zip: HOLLYWOOD, FL 33019

Title: D  
Name: BARKER-ANCTIL, ADRIENNE  
Address: 1019 OLD BLUSH  
City-St-Zip: CELEBRATION, FL 34747

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DARLENE BOWEN

CFO

02/22/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date